SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

F	OR	LINE	PAGE	1	5/	OF	2	289			
(check only one)											
	X	11a		11b		11c		11	d		
		12		13a		13h		14			15

ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Patriots for Perry Full Name (Last, First, Middle Initial) **CLUB FOR GROWTH** Date of Receipt Mailing Address 2001 L STREET NW, SUITE 600 2020 24 City State Zip Code Transaction ID: SA11C.27905 DC 20036-4967 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00432260 federal political committee. 11200.00 Name of Employer Occupation ✗ Memo Item Receipt For: 2020 Election Cycle-to-Date CONTRIBUTION Primary General 186321.00 Other (specify) SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD Full Name (Last, First, Middle Initial) GABY, BARBARA, , MRS., Date of Receipt Mailing Address 445 OLD HOMESTEAD TRAIL 2020 02 17 City State Zip Code Transaction ID: SA11A.27911 30097-8027 JOHNS CREEK GΑ FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2800.00 Name of Employer Occupation **GABY FOUNDATION TRUSTEE** x Memo Item Receipt For: 2020 Election Cycle-to-Date CONTRIBUTION Primary ✗ General 5600.00 Other (specify) ▼ REDESIGNATION FROM PRIMARY Full Name (Last, First, Middle Initial) GABY, BARBARA, , MRS., Date of Receipt Mailing Address 445 OLD HOMESTEAD TRAIL 17 City State Zip Code Transaction ID: SA11A.27911B JOHNS CREEK GΑ 30097-8027 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. -2800.00Name of Employer Occupation **GABY FOUNDATION** TRUSTEE Memo Item Receipt For: 2020 Election Cycle-to-Date CONTRIBUTION Primary General 5600.00 Other (specify) REDESIGNATION TO GENERAL 0.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....